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SERIAL NUMBER 10/806,719	FILING DATE 03/23/2004 RULE	CLASS 607	GROUP ART UNIT 3762	ATTORNEY DOCKET NO. 279.721US1
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APPLICANTS

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** CONTINUING DATA *****
 mk

** FOREIGN APPLICATIONS *****
 mk

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 06/07/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: <i>mk</i> Initials: <i>mk</i>	MN	4	50	7

ADDRESS
 21186
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TITLE
 System and method for recovery from memory errors in a medical device

FILING FEE RECEIVED 1654	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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